

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEMOCRATS FOR EDUCATION REFORM

ADDRESS (number and street)

222 BROADWAY 19TH FLOOR

Check if different  
than previously  
reported. (ACC)

NEW YORK

NY

10038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00417733

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

van Keerbergen, Patrick, , ,

Type or Print Name of Treasurer

Signature of Treasurer

van Keerbergen, Patrick, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**DEMOCRATS FOR EDUCATION REFORM**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 03 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y 03 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2020		31055.52
(b) Cash on Hand at Beginning of Reporting Period.....	18890.22	
(c) Total Receipts (from Line 19) .....	6200.00	6200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25090.22	37255.52
7. Total Disbursements (from Line 31).....	2134.17	14299.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22956.05	22956.05
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	11650.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**DEMOCRATS FOR EDUCATION REFORM**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	0

<b>I. Receipts</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5750.00	5750.00
(ii) Unitemized .....	450.00	450.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6200.00	6200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6200.00	6200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6200.00	6200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6200.00	6200.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1134.17	4299.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1134.17	4299.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	10000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2134.17	14299.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2134.17	14299.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6200.00	6200.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6200.00	6200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	1134.17	4299.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	1134.17	4299.47

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crusey, Lea, , ,

Mailing Address 316 6th St. NE

City  
WashingtonState  
DCZip Code  
20002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DC Public Charter School BoardOccupation (for Individual)  
Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2020

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reilly, John, , ,

Mailing Address 490 North Road

City  
TroyState  
NYZip Code  
12180FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Dynamic Applications, Inc.Occupation (for Individual)  
Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2020

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stavis, Robert, , ,

Mailing Address 211 Hommocks Rd.

City  
LarchmontState  
NYZip Code  
10538FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BVPOccupation (for Individual)  
Venture Capitalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2020

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Contribution.

SUBTOTAL of Receipts This Page (optional).....▶

5500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 11  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DEMOCRATS FOR EDUCATION REFORM**

<b>A.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sullivan, Mary Ann, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2020 <b>Transaction ID : SA11AI.4168</b>		
Mailing Address 350 N. Meridian St., Ste. 102			Amount of Each Receipt this Period 250.00		
City Indianapolis	State IN	Zip Code 46204	<input type="checkbox"/> Memo Item Contribution.		
FEC ID number of contributing federal political committee.		C	Aggregate Year-to-Date ▼ 250.00		
Name of Employer (for Individual) N/A		Occupation (for Individual) Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
<b>B.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C	Aggregate Year-to-Date ▼		
Name of Employer (for Individual)		Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C	Aggregate Year-to-Date ▼		
Name of Employer (for Individual)		Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			250.00		
<b>TOTAL</b> This Period (last page this line number only).....			5750.00		

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATS FOR EDUCATION REFORM**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine**

Mailing Address 2125 14th St NW

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4178**

Amount of Each Disbursement this Period

251.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy.

City  
Mountain ViewState  
CAZip Code  
94043-1351Purpose of Disbursement  
Email and Online Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4147**

Amount of Each Disbursement this Period

6.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Pkwy.

City  
Mountain ViewState  
CAZip Code  
94043-1351Purpose of Disbursement  
Email and Online Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4148**

Amount of Each Disbursement this Period

419.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

677.18



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATS FOR EDUCATION REFORM**

Full Name (Last, First, Middle Initial)

**A. Intuit QuickBooks**

Mailing Address 2700 Coast Ave.

City  
Mountain ViewState  
CAZip Code  
94043-1140Purpose of Disbursement  
Accounting Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2020

FEC Identification Number

**C****Transaction ID : SB21B.4153**

Amount of Each Disbursement this Period

76.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mailchimp**Mailing Address 675 Ponce de Leon Ave. NE  
Suite 5000City  
AtlantaState  
GAZip Code  
30308Purpose of Disbursement  
Online Software (No Candidates)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2020

FEC Identification Number

**C****Transaction ID : SB21B.4156**

Amount of Each Disbursement this Period

107.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mailchimp**Mailing Address 675 Ponce de Leon Ave. NE  
Suite 5000City  
AtlantaState  
GAZip Code  
30308Purpose of Disbursement  
Online Software (No Candidates)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2020

FEC Identification Number

**C****Transaction ID : SB21B.4157**

Amount of Each Disbursement this Period

97.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

281.99

959.17

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DEMOCRATS FOR EDUCATION REFORM**

Full Name (Last, First, Middle Initial)

**A. SPANBERGER FOR CONGRESS**

Mailing Address PO BOX 3121

City  
GLEN ALLENState  
VAZip Code  
23058Purpose of Disbursement  
Contribution

Candidate Name

**SPANBERGER FOR CONGRESS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2020

FEC Identification Number

**C** C00649913**Transaction ID : SB23.4180**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

1000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 OF 11

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DEMOCRATS FOR EDUCATION REFORM**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Burns, Whitney, , ,**Nature of Debt (Purpose):  
Compliance Services

Mailing Address PO Box 1174

City  
SpringfieldState  
VAZip Code  
22151

Outstanding Balance Beginning This Period

11650.00

Transaction ID : SD10.4124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11650.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

11650.00

2) **TOTALS** This Period (last page this line number only)..... ►

11650.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

11650.00